

## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:  
 My residence, post office address and citizenship are as stated below next to my name; and  
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled FOR POINTS OF SALE:  
MATCH-CODE-RESPONSIVE, SELECTIVE, WHOLE-TRANSACTIONS-DATA CAPTURE  
 the specification of which METHOD, SYSTEMS AND APPARATUS

(check  is attached hereto.  
 one)  was filed on \_\_\_\_\_ as

Application Serial No. \_\_\_\_\_

and was amended on \_\_\_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: **None**

Prior Foreign Application(s)			Priority Claimed	
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/>	<input type="checkbox"/>
			Yes	No
			Yes	No
			Yes	No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

<u>09/026,289</u>	<u>February 19, 1998</u>	<u>pending</u>
(Application Serial No.)	(Filing Date)	(Status — patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status — patented, pending, abandoned)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint G. KENDALL PARMELEE, Reg. No. 17,319, whose address is: PMB 307, 800 Village Walk, Guilford, Connecticut 06437, my attorney, to prosecute this application, and to transact all business in the U.S. Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO: Attorney G. Kendall Parmelee PMB 307 800 Village Walk Guilford, Connecticut 06437	DIRECT TELEPHONE CALLS TO: Attorney G. Kendall Parmelee Telephone: (203) 453-1246 Fax: (203) 453-1486
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor	<u>ROLAND D. TAI</u>
Inventor's signature	<u>roland tai</u>
Residence	<u>Cos Cob, Connecticut 06807-1807</u>
Citizenship	<u>United States of America</u>
Post Office Address	<u>26 Sundance Drive, Cos Cob, Connecticut 06807</u>

Full name of second joint inventor, if any	_____
Inventor's signature	_____
Residence	_____
Citizenship	_____
Post Office Address	_____

Full name of third joint inventor, if any	_____
Inventor's Signature	_____
Residence	_____
Citizenship	_____
Post Office Address	_____

## DECLARATION AND POWER OF ATTORNEY

ATTORNEY'S DOCKET NO.  
1624.001

As a below named inventor, I hereby declare that:  
 My residence, post office address and citizenship are as stated below next to my name; and  
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled FOR POINTS OF SALE: MATCH-CODE-RESPONSIVE, SELECTIVE, WHOLE-TRANSACTIONS-DATA CAPTURE METHOD, SYSTEMS AND APPARATUS  
 the specification of which

(check  is attached hereto.  
 one)  was filed on \_\_\_\_\_ as

Application Serial No. \_\_\_\_\_

and was amended on \_\_\_\_\_  
 (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: None

## Prior Foreign Application(s) Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application: None

(Application Serial No.) (Filing Date) (Status — patented, pending, abandoned)

(Application Serial No.) (Filing Date) (Status — patented, pending, abandoned)

POWER OF ATTORNEY: As a named inventor, I hereby appoint G. KENDALL PARMELEE, Reg. No. 17,319 and HOWARD M. BOLLINGER, Reg. No. 17,618 whose address is Parmelee & Bollinger, LLP, 460 Summer Street, Stamford, Connecticut 06901, and each of them, my attorneys, to prosecute this application, and to transact all business in the U.S. Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO: G. KENDALL PARMELEE  
 PARMELEE & BOLLINGER, LLP  
 460 Summer Street  
 Stamford, Connecticut 06901

DIRECT TELEPHONE CALLS TO:  
G. KENDALL PARMELEE  
 PARMELEE & BOLLINGER, LLP  
 Tel: (203) 327-2650 Fax: (203) 323-4729

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor BOLAND D. TAI  
 Inventor's signature Boland D. Tai Date Feb 18, 1998  
 Residence Cos Cob, Connecticut 06807-1807  
 Citizenship United States of America  
 Post Office Address 26 Sundance Drive, Cos Cob, Connecticut 06807

Full name of second joint inventor, if any \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
 Residence \_\_\_\_\_  
 Citizenship \_\_\_\_\_  
 Post Office Address \_\_\_\_\_

Full name of third joint inventor, if any \_\_\_\_\_  
 Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Residence \_\_\_\_\_  
 Citizenship \_\_\_\_\_  
 Post Office Address \_\_\_\_\_